

**State of Indiana
2017 Health Plan Comparisons
Maximum Exposure Calculations**

Single Coverage

	Wellness	CDHP 1	CDHP 2	Traditional PPO
Annual Employee Premium	\$397.80	\$756.60	\$2,954.64	\$8,484.84
Maximum Out of Pocket	\$4,000.00	\$4,000.00	\$3,000.00	\$3,000.00
HSA Contribution	(\$1,251.12)	(\$1,001.52)	(\$599.04)	not applicable
Total Exposure	\$3,146.68	\$3,755.08	\$5,355.60	\$11,484.84

Family Coverage

	Wellness	CDHP 1	CDHP 2	Traditional PPO
Annual Employee Premium	\$1,269.84	\$2,318.16	\$8,565.96	\$24,161.28
Maximum Out of Pocket	\$8,000.00	\$8,000.00	\$6,000.00	\$6,000.00
HSA Contribution	(\$2,502.24)	(\$2,003.04)	(\$1,198.08)	not applicable
Total Exposure	\$6,767.60	\$8,315.12	\$13,367.88	\$30,161.28

Footnote:

- A.) Example assumes employee takes advantage of the Non-Tobacco Use Incentive
- B.) Example assumes costs are incurred within the Anthem provider network
- C.) Example assumes employee has an open HSA account